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: November 2, 2001

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HUMAN PHAGOCYTE

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RECEPTORS

Examiner

Kemmerer, Elizabeth

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CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

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Nancy W. Vensko, Reg. No. 36,298

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Power of Attorney by Assignee Under 37 C.F.R. § 3.73(b) and Exclusion of Inventor under 37 C.F.R. § 3.71.
- (X) Associate Power of Attorney.
- (X) Change of Correspondence Address.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Nancy W. Vensko

Registration No. 36,298

-Attorney-of-Record-

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